1	REPORTING DEATH INVOLVING CONTROLLED
2	SUBSTANCE AMENDMENTS
3	2016 GENERAL SESSION
4	STATE OF UTAH
5	Chief Sponsor: Brad M. Daw
6	Senate Sponsor: Curtis S. Bramble
7 8	LONG TITLE
9	General Description:
10	This bill provides for the notification of a practitioner when the medical examiner
11	determines that a death resulted from poisoning or overdose involving a controlled
12	substance that the practitioner may have prescribed to the decedent.
13	Highlighted Provisions:
14	This bill:
15	<ul> <li>requires the medical examiner to provide a report to the Division of Occupational</li> </ul>
16	and Professional Licensing (DOPL) when the medical examiner determines that a
17	death resulted from poisoning or overdose involving a prescribed controlled
18	substance;
19	<ul> <li>requires that, when DOPL receives a report described in the preceding paragraph,</li> </ul>
20	DOPL shall notify each practitioner who may have written a prescription for the
21	controlled substance involved in the poisoning or overdose; and
22	makes technical changes.
23	Money Appropriated in this Bill:
24	None
25	Other Special Clauses:
26	None
27	<b>Utah Code Sections Affected:</b>



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AMENDS:
58-37f-702, as enacted by Laws of Utah 2010, Chapter 290 and renumbered and
amended by Coordination Clause, Laws of Utah 2010, Chapter 290
ENACTS:
<b>26-4-10.5</b> , Utah Code Annotated 1953
Be it enacted by the Legislature of the state of Utah:
Section 1. Section <b>26-4-10.5</b> is enacted to read:
26-4-10.5. Medical examiner to report death caused by prescribed controlled
substance poisoning or overdose.
(1) If a medical examiner determines that the death of a person who is 12 years of age
or older at the time of death resulted from poisoning or overdose involving a prescribed
controlled substance, the medical examiner shall, within three business days after the day on
which the medical examiner determines the cause of death, send a written report to the
Division of Occupational and Professional Licensing, created in Section 58-1-103, that
includes:
(a) the decedent's name;
(b) each drug or other substance found in the decedent's system that may have
contributed to the poisoning or overdose, if known; and
(c) the name of each person the medical examiner has reason to believe may have
prescribed a controlled substance described in Subsection (1)(b) to the decedent.
(2) This section does not create a new cause of action.
Section 2. Section <b>58-37f-702</b> is amended to read:
58-37f-702. Reporting prescribed controlled substance poisoning or overdose to a
practitioner.
(1) [Beginning on July 1, 2012,] The division shall take the actions described in
Subsection (2) if the division receives a report from:
(a) a medical examiner under Section 26-4-10.5 regarding a death caused by poisoning
or overdose involving a prescribed controlled substance; or
(b) a general acute hospital under Section 26-21-26[;] regarding admission to a general
acute hospital for poisoning or overdose involving a prescribed controlled substance the

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59	$\underline{(2)}$ The division shall, within three business days after the day on which [the] $\underline{a}$ report
60	in Subsection (1) is received:
51	(a) attempt to identify, through the database, each practitioner who may have
52	prescribed the controlled substance to the patient; and
53	(b) provide each practitioner identified under Subsection [(1)] (2)(a) with:
54	(i) a copy of the report provided by the <u>medical examiner under Section 26-4-10.5</u> or
55	the general acute hospital under Section 26-21-26; and
66	(ii) the information obtained from the database that led the division to determine that
67	the practitioner receiving the information may have prescribed the controlled substance to the
68	person named in the report.
59	[(2)] (3) It is the intent of the Legislature that the information provided under
70	Subsection $[(1)]$ $(2)$ (b) is provided for the purpose of assisting the practitioner in:
71	(a) discussing with the patient or others issues relating to the poisoning or overdose;
72	(b) advising the patient or others of measures that may be taken to avoid a future
73	poisoning or overdose; and
74	(c) making decisions regarding future prescriptions written for the patient or others.
75	[(3)] (4) Beginning on July 1, 2010, the division shall, in accordance with Section
76	63J-1-504, increase the licensing fee described in Subsection 58-37-6(1)(b) to pay the startup
77	and ongoing costs of the division for complying with the requirements of this section.

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